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CONFIRMATION NO. 6883

<b>SERIAL NUMBER</b> 09/369,510	<b>FILING OR 371(c) DATE</b> 08/06/1999 <b>RULE</b>	<b>CLASS</b> 382	<b>GROUP ART UNIT</b> 2624	<b>ATTORNEY DOCKET NO.</b> 1998P82218 US01	
<b>APPLICANTS</b> JOHN A HOSSACK, PALO ALTO, CA; LINYONG PANG, STANFORD, CA; THILAKA SUMANAWEEERA, SAN JOSE, CA;					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/114,194 12/30/1998					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/30/1999</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 16	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 28524					
<b>TITLE</b> MEDICAL DIAGNOSTIC ULTRASONIC IMAGING METHOD AND SYSTEM FOR DISPLAYING MULTI-PHASE, MULTI-FRAME IMAGES					
<b>FILING FEE RECEIVED</b> 1542	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		